



Early Journal Content on JSTOR, Free to Anyone in the World

This article is one of nearly 500,000 scholarly works digitized and made freely available to everyone in the world by JSTOR.

Known as the Early Journal Content, this set of works include research articles, news, letters, and other writings published in more than 200 of the oldest leading academic journals. The works date from the mid-seventeenth to the early twentieth centuries.

We encourage people to read and share the Early Journal Content openly and to tell others that this resource exists. People may post this content online or redistribute in any way for non-commercial purposes.

Read more about Early Journal Content at <http://about.jstor.org/participate-jstor/individuals/early-journal-content>.

JSTOR is a digital library of academic journals, books, and primary source objects. JSTOR helps people discover, use, and build upon a wide range of content through a powerful research and teaching platform, and preserves this content for future generations. JSTOR is part of ITHAKA, a not-for-profit organization that also includes Ithaka S+R and Portico. For more information about JSTOR, please contact support@jstor.org.

old, weighing 9½ pounds and as normal as any baby could be. For the first three months in her life she was fed with a medicine dropper, after that a tiny nipple was made for her by puncturing the rubber bulb of a medicine dropper. She is now over three years old, can walk and talk as any baby her age, and is in every way a prize incubator baby.

Should the premature baby be sent to an institution? Unless the parents be very poor the answer will unhesitatingly be in the negative. No infant should be sent to an asylum, or hospital, when its need, though imperfectly, can be fulfilled at home, and this is true of the premature baby. The results in private practice are much better than in institutions.

During the two years I spent in the Lying-In Hospital in New York, we had remarkable results in rearing our premature babies, though there was not an incubator in the hospital. They were kept warm in a cotton-lined crib with plenty of hot water bags. They had a warm bath every morning, followed by an olive oil rub, and each day they had a sun bath in the window seat for several hours. As it was always convenient to get human milk, we did not have much trouble with their food.

From careful observation made while at the Lying-In Hospital it seems that female babies have a greater endurance than males, and premature girls will live while a boy born under like conditions oftentimes dies. It is also well to note that an eight months' baby has better chances to live than a seven months' baby, although much has been said to the contrary. A good incubator can be made at home out of a basket or box, and with a thermometer, blanket, and several hot water bags, a very even temperature may be maintained. But the most difficult task in rearing premature infants is not so much in the prevention of heat loss, but in maintenance of a proper nutrition.

CARE OF THE INSANE

By E. MAUDE JONES

Boston City Hospital

THERE is no class of nursing which calls for more intelligent and careful management than the care of insane. The first point to be observed is, I think, to gain the confidence of your patient. This, in many cases, involves the display of much tact, and careful study of her patient, on the part of the nurse, for the reason that many

insane persons are suspicious of everyone about them, and I have known many patients whose particular delusion was that the nurse was being bribed to poison them. Patients of this class seldom make known why they refuse to take the food or drink offered, and will persistently refuse it. I remember one woman who would take nothing which was offered her in the form of drinks or nourishment, unless first tasted by the nurse in her presence. Many times this procedure is not sufficient to allay the patient's fears, and œsophageal feedings must be resorted to for a short period. A nurse should never make false promises to her patient, hoping that, in this way, she may gain the point in question. Many insane people have excellent memories combined with an unusual amount of craftiness which often goes with the disease.

Insane patients, as a rule, lack concentration of thought. Those who are well enough enjoy dancing, gymnastics, driving, walking, coarse fancy-work, such as crocheting with yarn (those of bright hue in particular), and basket-work, while fine embroidery, fine needlework, or any of the finer kinds of fancy-work are but poorly done by those patients who, in health, were proficient along these lines. I remember a woman who, in health, embroidered for the show windows for two of the largest stores in Boston. After her mind became affected she tried many of the coarser kinds of work, such as embroidering sofa-pillows, all to no purpose. She would sit quietly and do excellent work for a few minutes, when she became restless and the stitches were unevenly made, oftentimes in the wrong places.

Much has been done, in late years, for persons afflicted in this way, by providing diversions of many kinds, by the use of hydrotherapeutics, massage, electricity, etc.

Nurses in private work are seldom called upon to care for persons afflicted with mental disturbances in their homes. The care of such patients is very difficult and, as a rule, two nurses are necessary. I was called upon a few years ago to care for a woman who seemed, at first, to be suffering from a severe case of nephritis. After a few days the disease was pronounced premature senile dementia. The patient was in a state of active delirium most of the time, both night and day. Triple bromides were given for sedative, and were found to be better in this particular case than hyoscin or codein, both of which were tried. The bromides seemed to have no effect upon the patient until she had taken repeated doses at regular intervals for two or three days, when she began to feel the effects of the accumulation of the drugs, when there would be perhaps two days and a night of

almost unbroken sleep, out of which the patient would awaken as active as before. I remained on this case six months and found the nursing care much the same as for a person suffering with physical illness and delirium. The back should be well rubbed and powdered at least twice a day, to prevent bed-sores caused by friction. Care should be given the mouth after the medicine is taken, as bromides taken frequently are injurious to mucous membranes. We found it best to keep this woman in bed, as quiet as possible, while in many cases one would think it best to allow the patient up, hoping that by being so active he would become tired or exhausted enough to sleep without the use of drugs. Each person suffering from mental trouble must be treated differently from all others. Among the many hundreds of cases with which I have come in contact, no two were exactly similar in all respects.

THE PHYSIOLOGICAL AND PSYCHOLOGICAL VALUE OF MUSCULAR EXERCISE

By WILLIAM C. RODEN

Butler Hospital, Providence, R. I.

THE physiological value of bodily exercise has been appreciated by man for over two thousand years and as early as 336 B. C. a definite and graded form of exercise was practised in the education of the youth as a means of developing a healthy, powerful and agile body, at that time so necessary to man in warfare and as a protection in every-day life.

King Philip II was a teacher in the art of drilling with a spear-like weapon then used in war, and his triumphant victory over the Athenians at the battle of Charonea, 338 B. C., was the result of physical strength and training. And still earlier the Greeks, with acknowledged success, practised running, jumping and wrestling; but the first man to appreciate the need of the public for some definite form of self-training was a then-famous physician, Hippocrates, who had a full and clear comprehension of the direct beneficial effects of several exercises in some conditions of ill health. For corpulence this man introduced the use of a large ball suspended from the ceiling, resembling the present day medicine ball; for the development of the lungs,—running, walking, loud talking and singing and many others having a therapeutical and educational value.

It was not until 1569 that anything was published on exercise,